Most of the book (23 of 30 chapters) is devoted to issues surrounding aortic aneurysms. The chapters are well written, abundantly referenced, and easily read in one sitting. Black and white illustrations are plentiful and complementary to the central discussions. As the editors state, the book represents a survey of experts, and thus, proponents of alternative methods may gain insightful information. For example, a chapter dedicated to preoperative cardiac evaluation challenges the pervasive view that diagnosis and prophylactic treatment of coronary artery disease before aortic aneurysm repair produces significant improvement in morbidity and survival rates. Similarly, a chapter that outlines an approach to infected aortic grafts that consists of retroperitoneal in-line replacement followed by transperitoneal removal of the infected graft has produced results that convinced the authors that equivalent and perhaps improved results can be obtained with this unusual procedure as compared with graft removal with extra-anatomic bypass grafting.

The editing of the book is adequate, with most of the chapters giving focus to the assigned topics. Some redundancy is evident in the two chapters on thoracoabdominal aneurysm repair. Both cover the important ancillary measures, such as spinal drainage, bypass grafting, and medications, that are becoming the standard of care during perioperative management. Perhaps one chapter with more information dedicated to the details of the operative repair as they apply to different types of thoracoabdominal aneurysms would improve the discussion. Other chapters that strengthen the value of the book discuss rare occurrences, such as chylous ascites, after aortic aneurysm repair and concomitant coronary artery bypass grafting with aortic aneurysm repair. In contrast, less information is given about more common variations, such as inflammatory aortic aneurysm or the presence of a horseshoe kidney. These topics and other issues are covered in one chapter that addresses complicated aortic aneurysm repair.

Overall, this text is an excellent review of current concepts in the diagnosis and treatment of aneurysm disease. Few books achieve such a wide scope and maintain conciseness. Surgeons routinely involved in aortic and peripheral aneurysm repair will find this book an outstanding referral source that is complementary to the standard vascular textbooks. Lastly, as the role of intraluminal endovascular graft repair of aortic aneurysm continues to evolve, the timing of publication reminds us of the vast array of issues involved in providing optimal care to patients with aortic and peripheral arterial aneurysms.

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The vulnerable atherosclerotic plaque: understanding, identification, and modification

Valentin Fuster; Armonk; 1999; Futura; 429 pages; $115.00.

Another text from the American Heart Association's Monograph Series, *The vulnerable atherosclerotic plaque: understanding, identification, and modification* provides the reader with a comprehensive review of this important and rapidly evolving field. The text includes contributions from many of the index investigators from both biochemical and clinical backgrounds in atherosclerotic disease. Discussion is essentially directed at vulnerable plaque disease, clinical and investigational imaging methods, structural and functional components, and mechanical forces in plaque disruption. Each section of three to seven chapters is followed by the transcription of candid discussions between the panel of editors.

In the first three chapters, the pathobiology and clinical implications of the vulnerable plaque are discussed. Particular emphasis is placed on the three areas in which atherosclerotic disease plays a significant role: coronary arteries, carotid arteries, and the aorta. An attempt to provide a global understanding of the dynamic nature of plaque physiology is made. Plaque composition, morphology, location, and intraluminal forces are addressed as they relate to plaque disruption, embolization, thrombosis, and ultimately clinical sequela.

Another important area of research focuses on the understanding and development of methods used to detect atherosclerotic plaque. Emphasis has been placed on thorough discussions of all the following techniques: angiography, intravascular ultrasound scanning, angioscopy, computed tomography, magnetic resonance imaging, nuclear magnetic resonance, radioisotopic imaging, thermography, and optical coherence tomography. It becomes clear in this section that, although angiography currently remains the gold standard, many new methods are under investigation that soon may allow improved plaque resolution. Not only will plaque size be better determined, but the composition of the lesion in terms of core lipids and fibrous cap thickness will be known. Images (black/white and color) are clearly reproduced throughout each chapter. One cannot help but understand the therapeutic advantages that will be gained with the perfection of the imaging techniques currently being developed and characterized.

In the last third of the text, discussion is directed toward the experimental data that concern the pathobiology of the vulnerable plaque. In particular, the structural, cellular, and functional components of the plaque and the mechanical forces important to plaque rupture are addressed. The dynamic nature of the vessel wall is addressed in respect to arterial remodeling, lipid and proteogly metabolism, metalloproteinase activity, and calcium deposition. The chapter on metalloproteinases

provides a particularly comprehensive and timely overview. Equal space is given to the investigations into mechanical wall stress/strain, flow dynamics, and theology as they relate to the vulnerable plaque and thrombosis.

In summary, a detailed yet tolerable overview of the current concepts related to atherosclerotic disease and plaque rupture is presented. Chapters are well written, concise, and contain extensive reference sections for those who want to proceed with a more intense scrutiny of a particular topic. This text outlines the strategies we will use to evaluate and treat atherosclerosis in the next decade. It is important reading for surgeons, internists, radiologists, and basic scientists with an interest in the treatment of vascular disease.

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Trauma care: beyond the resuscitation room

Peter Driscoll, David Skinner; London; 1998; BMJ; 312 pages; $110.00.

Trauma care: beyond the resuscitation room by Peter Driscoll and David Skinner is written on the basis of information, practices, and systems used in the United Kingdom and Australia. The authors state that advancements in prehospital care and resuscitation have improved patient survival rates and that determination of treatment priorities in the early stages of care is important. The goal of this text is to give indepth insight into specialist management from resuscitation to rehabilitation.

In an effort to attain this goal, a wide range of trauma topics is discussed. The topics flow logically from the basics of resuscitation to the specific organ systems and their unique clinical problems. Included in the review of trauma are chapters that focus on small subsets of patients, such as pediatric, geriatric, and ophthalmic trauma. All the chapters contain multiple illustrations, drawings, and charts that are well labeled and easy to interpret. Many of the chapters contain concise reviews of pertinent anatomy. The broad overview of trauma care provided would be appropriate for those who are less experienced in trauma care, such as junior house staff.

The text has limitations that may prevent it from being widely useful in the United States. The authors are consultants in the United Kingdom. Although there are many similarities to American trauma centers, there are also many differences. The unfortunate predilection toward violent injuries in the United States, particularly by gunshot, is one notable example.

The authors attempted to provide an exhaustive review of trauma. Although they succeeded in covering most topics, detail was sacrificed to achieve this goal. The discussions of definitive care were limited, and few technical descriptions of procedures are provided. New technologies and approaches to patient care are not widely discussed. The authors speak of care beyond the resuscitation room, but much of the evaluation of the patient found in the text would be done in the resuscitation room. The text does not provide information found in many existing comprehensive trauma texts and provides little new information for those experienced in trauma care.

Trauma care: beyond the resuscitation room provides a brief review of a multitude of patient problems in trauma. It is well illustrated and logically organized. The book is limited by the overall lack of detail. The information provided could serve as a review of basic care or a source text for those beginning in trauma care.

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Endosurgery

James Toouli, Dominique Gossot, John Hunter; New York; 1996; Churchill Livingstone; 1058 pages; $245.00.

The wide acceptance of minimally invasive surgical techniques during the past decade has resulted in an expansion of new surgical procedures reminiscent of the surgical revolution after the acceptance of Lord Lister's antiseptic principles more than a hundred years ago. In this text's preface, the editors state the goal of this text to be the discipline standard for minimal access surgical procedures performed through laparoscopes, thoracoscopes, and endoscopes. Capturing the range of new and often still evolving techniques of minimally invasive surgery along with intraluminal endoscopy is a monumental task, and a task that *Endosurgery* accomplishes better than any text currently available.

The 131 authors of the 105 chapters often are internationally recognized experts in their fields. The first 200 pages of this 1000-page text contain technical information about minimal access equipment, video and computer technology, optics, teaching, hemostasis, sterilization, anesthesia, physiology, and fundamental minimally invasive surgical concepts. The chapters on anesthesia for laparoscopy and the unique complications of pneumoperitoneum are particularly useful for all lapraroscopic surgeons. If you are interested in knowing about the optics of the telescope, how the camera computer chip works, different aspects of television monitors, and recording devices, there is a wealth of information in this section. Many of these chapters are complete and could stand alone for reference tools. This information would be particularly beneficial for anyone try-